

N13000005950

(Requestor's Name)

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(Address)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

C. LEWIS
SEP 17 2013
EXAMINER

Constance d'Angelis
Attorney-at-Law
84 Davis Blvd. # 201
Tampa, FL 33606

813.442.8442

813.245.7073

November 5, 2013

Carolyn Lewis
Regulatory Specialist II
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32314

RE: Visions Applied Foundation, Inc.

N 13000005950

Dear Specialist Lewis:

Thank you very much for our conversation of yesterday.

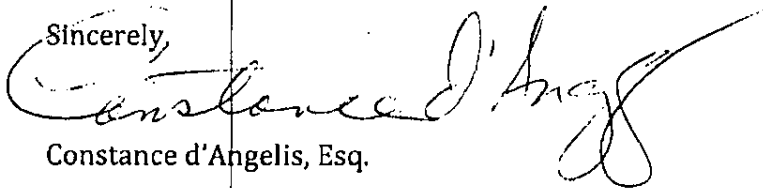
I am including a new page 1 of the Articles of Amendment to the Articles of Incorporation for the above referenced nonprofit corporation.

I have signed the document as the new registered agent. I trust it meets approval.

If there is anything additional or any necessity of modification, please contact me. I greatly appreciate your competent assistance in this matter.

Sincerely,

Constance d'Angelis, Esq.



AttorneyConstance@gmail.com

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Visions Applied Foundation, Inc

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dianne Allen

(Name of Contact Person)

Visions Applied Foundation, Inc

(Firm/ Company)

PO Box 664

(Address)

Pinellas Park, FL 33780

(City/ State and Zip Code)

dianne.a.allen@gmail.com.

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dianne Allen

(Name of Contact Person)

at (727) 644-6622

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 17, 2013

DIANNE ALLEN / VISIONS APPLIED FOUNDATION INC
PO BOX 664
PINELLAS PARK, FL 33780

SUBJECT: VISIONS APPLIED FOUNDATION, INC.
Ref. Number: N13000005950

We have received your document for VISIONS APPLIED FOUNDATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

The registered agent must sign accepting the designation.

We do not allow you to attach the articles of incorporation to the amendment. If you are filing amended and restated articles you must revise your document. You either file an amendment or you file amended and restated articles of incorporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 913A00021878

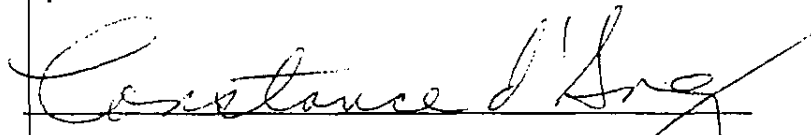
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TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of
VISIONS APPLIED FOUNDATION, INC.
N 13000005950

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendments to its articles of incorporation:

- A. New principal office address: 4112 104th Ave. N.
Clearwater, FL 33762
- B. New mailing address: P.O. Box 664
Pinellas Park, FL 33780
- C. Name of New Registered Agent: Constance d'Angelis, Esq.
New Registered Office Address: 84 Davis Blvd. # 201
Tampa, Florida, 33606
- New Registered Agent's Signature:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Constance d'Angelis, Esq (Signature of New Registered Agent)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	S, VP	Yvonne White	5715 15 th Ave N St Petersburg, FL 33710
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	VP	Jenny Spencer	612 Luzon Ave Tampa, FL 33606
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	S	Ballard Walden	5420 Dearbrooke Creek Circle #1 Tampa, FL 33624
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	P, T	Diane Allen	4112 104 th Ave N Clearwater, FL 33762
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: _____
date this document was signed.

Effective date if applicable: _____

(no more than 90 days after amendment file date)

13 OCT 30 AM 9:36

APPROVED
AND
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Adoption of Amendment(s)

(CHECK ONE)

☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

9/6/13

Signature

Dianne A. Allen

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Dianne A. Allen

(Typed or printed name of person signing)

President

(Title of person signing)